

## Volume 1, Issue 2



Department of Mental Retardation  
Office of Quality Management  
**Living WELL**



“The weather outside is  
frightful .....





*W*elcome to the second issue of "Living Well", a publication of the Department of Mental Retardation, Office of Quality Management. "Living Well" is published on a quarterly basis and features important information for individuals and their supporters.

*Information includes health advisories/alerts, home, work and community safety tips, and "promising practices" in services and supports to individuals with mental retardation. "Living Well" represents one component of DMR's continuing commitment to share information which will safeguard and improve the quality of lives of individuals we support. Information and knowledge is a powerful tool. We hope that this and future editions of "Living Well" will be used effectively to enhance our service system.*

*We'd welcome your feedback and suggestions regarding content areas for future editions of the publication. Please submit your suggestions to [Sharon.Oxx@dmr.state.ma.us](mailto:Sharon.Oxx@dmr.state.ma.us). Thank you!*

Gerald J. Morrissey, Jr. Commissioner  
Department of Mental Retardation

Fall 2002



Volume 1, Issue 2

# Do I have a Cold .....

*or is it THE FLU?!!*

Flu season is upon us (November through April) and everyone should be alert to early signs and symptoms of the illness. But how do you know if it's the flu or just a cold (rhinovirus)? Here are some clues:

**If you have the flu...**



- You have a fever (sometimes as high as 102+)
- You have a headache
- You are very tired (can even be extreme)
- You have a dry cough (that may progress to a productive cough)
- You may have a sore throat
- You have nasal congestion
- You have severe body aches
- It probably came on quite suddenly (some people can even tell you the moment you felt ill)
- You will be very ill for several days and take up to several weeks to recover fully
- You are unable to go about your daily routine

**If you have a cold....**

- You probably don't have a fever (and if you do it is very low grade)
- You have a runny nose
- You may have a loose productive cough
- You may have a headache from coughing
- You are able to continue your daily routine
- You feel a little "under the weather" for a few days
- The symptoms probably came on gradually over several days



**Uh oh, I have the flu. Now what do I do?**

- The flu is very contagious so stay home!
- Rest
- Drink plenty of liquids
- Wash your hands often!
- Avoid alcohol and tobacco
- Take medication to treat the symptoms (like acetaminophen for the aches and pains and cough syrup for the cough)
- See your physician if you are not improving after several days.



**Well...how contagious is it?**

- A person can spread the flu starting one day before they feel sick
- Adults can continue to pass the flu virus to others for another 3-7 days after symptoms start (children can pass it on for longer than 7 days)
- Symptoms start 1- 4 days after the virus enters the body
- Some people can be infected with the virus but have no symptoms. They can still pass the virus on to others though.

**How did I get it ?**

- The flu is spread when a person who has the flu coughs, sneezes or speaks and sends flu virus into the air and other people inhale the virus
- The virus enters the nose, throat, lungs of a person and begins to multiply, causing flu symptoms.
- Flu may less often be spread when a person touches a surface that has flu virus on it— a door handle for instance— and then touches his or her nose or mouth.

**How do I prevent the flu?  
This is a very simple answer:**

**GET A FLU SHOT**

**Never** give aspirin to a child or teenager who has the flu! (it can cause serious neurological damage)



Fall 2002



Volume 1, Issue 2

# Your Mother was right...

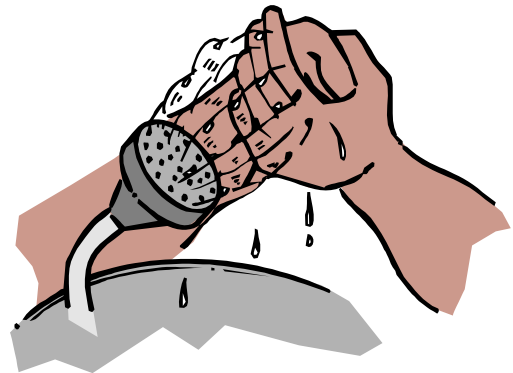
## Wash your Hands!

Recent studies have confirmed that hand –washing with soap and water or applying alcohol-based handrubs between caring for different individuals and throughout the day reduces the transmission of bacteria (germs) significantly; in some settings as much as 85%! Below are some facts that you may find very interesting and that may help you, your family and the people with whom you work to stay healthy, especially during flu and cold season.



- Improved hand washing or use of alcohol-based handrubs has been shown to actually end outbreaks of infections, reduce the transmission of antibiotic-resistant bacteria (like MRSA) and reduce overall infection rates.
- The CDC is recommending the use of alcohol-based handrubs for people who provide personal care to others because they can address some of the obstacles staff encounter when taking care of people. For example, lack of appropriate hand-washing opportunities when out in the community.
- Hand-washing with soap and water is still highly recommended to reduce the spread of germs. Using an antibacterial soap like Dial is also recommended. Use of liquid or foaming soaps in pump bottles is better than bars of soap.
- You should wash your hands for the length of time it takes you to sing “Happy Birthday”.
- When your hands are visibly soiled you should wash with soap and water.
- The use of gloves does not eliminate the need for hand-washing and hand washing does not eliminate the need for gloves. Gloves reduce hand contamination by 70-80% , prevent spreading germs to others and protects everyone from infection. Handrubs should be used before and after care is provided just as gloves should be changed before and after providing care.
- Alcohol-based handrubs significantly reduce the number of germs on the skin, are fast-acting and cause less skin irritation than many soaps. Allergies are very uncommon.
- Staff should avoid wearing artificial nails and keep natural nails less than ¼” long if they are caring for individuals at high risk for acquiring infections.
- Just as you encourage people to “cover their nose or mouth” when coughing or sneezing, you should encourage them to wash their hands after doing so as well as frequently throughout the day.

*Remember, the infection you prevent may be your own!*



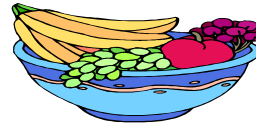


# Food Texture

## FOOD TEXTURE! WHAT'S THAT???

Food is such an important part of everyone's life that we are often reluctant to give food to someone other than a very young child that is chopped, ground, pureed or strained. It doesn't appear "normal" or even appetizing. However, sometimes it is necessary and often actually improves the enjoyment of food and eating by making swallowing easier and safer.

Some common terms for different food textures are:



- **Regular:** The food is normal texture. Difficult to chew foods are cut into bite size pieces no larger than a grape.
- **Cut-Up:** Food consists of a regular diet but all of it is hand cut into ½" cubes or bite-sized pieces.
- **Chopped:** Food is chopped into pea size pieces of ¼". Each food item is soft or cooked until soft. The food is recognizable for what it is. *Nuts, peanut butter, jimmies, coconut, rice and raisins are generally avoided.* Usually a food grinder or food processor is used to make this consistency.
- **Ground:** The texture consists of small pieces of each food type cut up to the size of an apple seed. It includes a good amount of sauce to moisten dry food and/or bind food together. *Nuts, peanut butter, jimmies, coconut, rice, and raisins are avoided.* A food grinder or food processor is used to make this food consistency.
- **Pureed:** Food is a smooth, moist, pudding-like consistency with no lumps. All food should drop off of the spoon in globs when the spoon is tilted but should not run off in a steady stream or be pasty or sticky. A food grinder or processor is used to make this food consistency. *Nuts, peanut butter, jimmies, coconut, rice and raisins are not given in this diet.*
- **Strained:** Food is smooth and moist and of absolutely uniform, slightly thin pudding-like consistency with no lumps or small food particles. A food grinder, food processor or blender is required to make this food consistency. *Nuts, peanut butter, jimmies, coconut, rice, and raisins are never allowed on this diet.*

But how do you know what food texture is right for the person with whom you are working? The Health Care Provider and the speech or occupational therapist will order specific food textures for the person after conducting tests. They will also instruct you on the "consistency" or "thickness" of those foods. They often use phrases like: "Mashed potatoes with the consistency (thickness) of pudding" or "juice with the consistency (thickness) of honey". There are even additives to add to liquids to "thicken" them to the appropriate consistency. The most common one is called "Thick-It". They are made up mostly of corn starch.



Please be especially careful during the holidays when many different foods are brought into the home as gifts or in order to make an event special. Including those foods in a person's diet without preparing it to the appropriate texture can be very harmful to that person. Such foods should be stored in a safe manner so that the individual cannot gain access to it by accident. It is also important to inform all visitors to the home that someone is on a special diet and that all foods need to be approved by knowledgeable staff or family.

*Thank you to Adria Hodas from TILL, Inc. for her valuable contribution to this article.*



# Choking and Aspiration

- **Choking** refers to an **obstruction** or **blockage** of the airway of a person which interferes with breathing. This is an emergency if the person is unable to clear their airway on their own by coughing. The **Heimlich Maneuver** may need to be used in that case. Only individuals who are trained in Basic Life Support should perform this maneuver. Whenever the Heimlich Maneuver is used the person should be evaluated by a health care provider in order to make sure that no damage was done to the person during the procedure as well as make sure that the person's airway is completely cleared.



- **Aspiration** refers to fluid or food **entering** the airway moving down into the lungs. Aspiration can be caused by food entering the lungs while eating or it can be caused by stomach contents moving back up the food tube (esophagus) and spilling over into the person's airway. Either can cause **aspiration pneumonia**. Most people cough violently when they aspirate but some people with neurologic damage do not. Their cough reflex has been weakened. When a person aspirates but does not cough, this is called a **silent aspiration**. A sign that someone is aspirating silently would be frequent pneumonias and chronic congestion. If a person aspirates often enough it can cause permanent damage to the lungs.

Unfortunately choking and aspiration are common problems experienced by people with mental retardation for many reasons, most of which can be true for anyone. Some of these reasons include:

- **Neurological and muscular disorders**  
like cerebral palsy and seizure disorders
- **Few or no teeth**
- **Not chewing adequately**
- **Eating too rapidly**
- **Putting too much food in one's mouth at one time**
- **Talking or being distracted while eating**
- **Medication side effects**
- **Poor posture while eating**
- **Putting non-food items into the mouth**
- **Gastro esophageal reflux disease (G.E.R.D.)**
- **Difficulty swallowing or moving food around the mouth**

It is very important to recognize a person's potential for aspiration and choking and use strategies to prevent it. Often, an evaluation by a speech therapist can help to make this diagnosis and to provide recommended strategies to prevent aspiration. Some such approaches include:

- **Modifying food texture to make swallowing easier**
- **Sitting in an upright position with the chin tucked and the head (but not the chest) tipped forward**
- **Taking small bites of food and alternating them with small sips of a drink**
- **Eating slowly**
- **Providing supervision at meal time**

**If you think someone that you work with is having swallowing problems or aspiration problems, please let your supervisor or their Health Care Provider know. They can conduct tests and will often recommend consultation with an occupational or speech therapist who is an expert in swallowing evaluations and disorders.**

*Thank you to Adria Hoda s from TILL, Inc. for her generous contribution to this article.*





## LET IT SNOW, LET IT SNOW, LET IT SNOW.....



With the approach of cooler weather, this is good a time to complete those tasks that help keep homes safe and secure. These can include:

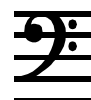


- Changing the batteries in all battery operated smoke detectors and flash lights.
- Securing the outdoor grill, and for gas grills, putting the gas canister in a secure place.
- Emptying lawn mowers of all gas and storing the empty mower in a garage or outdoor shed.
- Cleaning the fireplace in preparation for use on those cold, winter nights.
- Making sure the furnace has been inspected for the year and there is plenty of fuel to begin the winter. Space heaters should not be used as a heating solution.

*Helpful Hint: A great way to remember these different tasks that need to be done is to schedule them around the change with daylight savings time!*



## Slip Sliding Away.....



Snow can be beautiful as it falls, but dangerous as it accumulates on the ground. So...

- Make sure equipment for shoveling is in good repair and readily accessible.
- Have salt or sand handy to use after a snowfall or when icy.
- Now that the equipment is handy, shovel quickly after a snowfall and use salt or sand on icy surfaces to ensure that all egresses, not just the main exit from the home, are clear and safe to travel. Also, remember that wet leaves can be slippery too.
- Make sure the car is ready for the winter, ensuring there is always at least a half a tank of gas, so that it is ready for use in an emergency.
- Have flashlights strategically located in the event of a power outage.
- Winter activities can be fun. But remember,
  - When people go out, make sure everyone wears proper footwear to minimize the possibility of falls.
  - People should dress in layers and appropriately for weather. This is especially important for individuals who are less mobile, as they can suffer from the cold more quickly if they are unable to move their arms and legs. When in doubt, bundle up!

